

Form: Nomination for Cryptic Mason Youth Award

Grand Council of Cryptic Masons State of Indiana

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NOMINATION FOR CRYPTIC MASON YOUTH AWARD

NAME:		
COUNCIL:	No.	LOCATION:
DATE GREETED:		
What Youth Groups is he associated with / positions held?		
Explain why he is considered worthy of this outstanding nomination.		
Name of person submitting nomination	Email of Submitter	

Last Revised: 2/10/2019